

Board of Coal Mining Examiners P.O. Drawer 900 Big Stone Gap, VA 24219 (276) 523-8149

Advanced First Aid Practical Stations & CPR (Written & Practical)

| INSTRUCTOR: This form must be typed or printed in ink and submitted to the certification section prior to issuance of certification. | | | | | | | |
|--|--|---------------|---------|--------------|----------------|----------------|------------------|
| Na | me | Date of Birth | Forearm | Lower Leg | Spin/ Board | CPR Written | CPR Practical |
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| Pass = P Fail = F | *CPR Written must meet AHA/ARC passing score | | | | | | |
| I hereby certify that th and that the applicant Practices and CPR-Ob | has satisfactorily de | | | | | | |
| Name printed & signed | Certified First Aid | Instructor | (| Certificat | ion Numbe | r | |
| Name printed & signed | Certified First Aid | Instructor | 1 | Expiratio | n Date | | |
| DM-BCME-5 (Revised | | msu ucioi | J | Lapitano | n Daic | | |